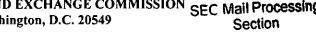
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JUL 2 4 2008 🔯

UNITED STATES

THOMSON REUTERS SECURITIES AND EXCHANGE COMMISSION SEC Mail Processing Washington, D.C. 20549





FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

JUL 16 2008

1440568

Washington, DC 110

Name of Offering (check if this is an APRIL 2008 – JULY 2008 – RULE 50		has changed, and indic	ate change.)		-		
Filing Under (Check box(es) that apply)	Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	□ ULOE		
Type of Filing: ☑ New Filing		IC IDENTIFICATION	N DATA	<u> </u>			
1. Enter the information requested about		TE IDENTIFICATION	1 1071171	-			
	s an amendment and n	ame has changed, and i	ndicate change.)				
Address of Executive Offices 2503 SOUTH BLVD, HOUSTON, TX		Telephone Number (including Area Code) (713) 562-1268					
Address of Principal Business Operation (if different from Executive Offices)	ie) Telephone N	Telephone Number (including Area Code)					
Brief description of Business THE COMPANY WAS FORMED TO TEXAS.	O ACQUIRE, OWN	AND OPERATE A SI	ELF STORAGE I	FACILITY IN PORT	ARTHUR,		
Type of Business Organization							
☐ corporation ☐ business trust		rship, already formed rship, to be formed	ゼ	✓ other (please specify): limited liability company			
Actual or Estimated Date of Incorporation	on or Organization:	Month Year 04 / 08	☑ Actual	☐ Estimated			
Jurisdiction of Incorporation or Organiza	•	U.S. Postal Service Ab		:: TX			

GENERAL INSTRUCTIONS

Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this from. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			A. BASIC IN	NFORMATION	
2. Enter the information					
			er, if the issuer has been		
	ach benefic curities of		ing the power to vote or	dispose, or direct the v	ote or disposition of, 10% or more of a class of equity
	ach executi		director of corporate is	suers and of corporate	general and managing partners of partnership issuers
• E:	ach general	and managir	ig partner of partnership	issuers.	
Check Box(es) that Appl	ly: ☑	2 Promoter	☐Beneficial Owner	□Executive Officer	☐ Director☐ General and/or Managing Partner
Full Name (Last name fit STARLIGHT INV			c		
Business or Residence A				ode)	-
1800 WEST LOOP					
Check Box(es) that Appl) Promoter			☑ Director ☑ General and/or Managing Partner
Full Name (Last name fi		idual)			
ABRAHAM TIEH					
Business or Residence A 2503 SOUTH BLV	-			ode)	
Check Box(es) that Appl		Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing
	_			Exceditive Officer	Partner
Full Name (Last name fi	rst, if indiv	idual)		•	
Business or Residence A	ddress (Number and S	Street, City, State, Zip C	ode)	
Check Box(es) that Appl	ly: C] Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name fi	rst, if indiv	ridual)			
Business or Residence A	ddress (Number and S	Street, City, State, Zip C	ode)	
Check Box(es) that Appl	ly: C] Promoter	□Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name fi	rst, if indiv	idual)			7.00.000
Business or Residence A	ddress (Number and 5	Street, City, State, Zip C	ode)	
Check Box(es) that Appl	ly: C	2 Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name fi	rst, if indiv	ridual)			
Business or Residence A	ddress (Number and S	Street, City, State, Zip C	ode)	·
Check Box(es) that Appl	ly: E] Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name fi	rst, if indiv	idual)			
Business or Residence A	ddress (Number and S	Street, City, State, Zip C	ode)	
Check Box(es) that Appl	ly: E) Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name fi	rst, if indiv	ridual)			A COS SERVE
Business or Residence A	ddress (Number and S	Street, City, State, Zip C	ode)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INF	ORMATI	ON ABO	UT OFF	ERING					
1.	Hac the in	suer cold	or does the	icenar in	tend to cel	l to non a	ccredited	l investors i	n this off	ring?		Yes □	No ☑
1,	rias tile is	suci suiu,	or does me	: ISSUEL III				x, Column 2				_	<u> </u>
2.	What is th	ne minimu	m investme	ent that wi				idual?				\$50	,000
											•	Yes	No
3.	Does the	offering pe	ermit joint	ownership	of a sing	le unit?						7 €3 • • • • • • • • • • • • • • • • • • •	
4.								will be pai					
								nnection waler register					
								is to be liste					
	or dealer,	you may s	et forth the	e informat	ion for the	at broker o	r dealer o	only.					
Full Nan	ne (Last na	me first, if	individual)	<u>.</u>								
	JĠHT IN												
Ducinece	or Resider	oo Addre	s (Numba	and Strag	at City St	tota Zin C	oda)						
	EST LO												
Name of	Associated	Broker of	r Dealer										
	Which Per											All Si	tatec
(Cii	cck An Si	aics of Ci.	icck ilidivii	Juai State	3/	••••••	••••••	***************	• • • • • • • • • • • • • • • • • • • •	••••••		AII 51	iaics
[AL]	[AK]	[AZ]✓	[AR]✓	[CA]✓	[CO]	[CT] ✓	[DE]	[DC]	[FL]✓	[GA]✓	[GI]		-
[IL]√ [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]✓	[LA]✓ [NM]	[ME] [NY]✓	[MD] [NC]	[MA] ✓ [ND]	[MI] [OH]✓	[MN] [OK]✓	[MS]✓ [OR]	[M(OJ 4]√
[RI] /		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PI	
Full Nan	ne (Last nai	me first, if	individual)									
Business	or Resider	ice Addres	s (Number	and Stree	et, City, St	ate, Zip C	ode)						
Name of	Associated	Broker of	r Dealer										
States in	Which Per	son Listed	Has Solic	ited or Int	ends to So	olicit Purcl	nasers						
	eck "All St									••••••	🗆 /	All Si	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[GI]	[11])]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	-
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P/	
[RI] Full Nam	[SC] ne (Last nai	[SD]	[TN]	TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PI	<u> </u>
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Dusiliess	or Resider	ice Addres	s (Number	and Succ	ei, City, Si	ate, Zip C	ode)						
N C	• • • • •		D 1										
Name of	Associated	Broker of	r Dealer										

	Which Per eck "All St											All St	tates
					•								
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [Ml]	[GA] [MN]	[GI] [MS]	[II] (Mi	-
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS]	[M0 [P/	_
(101)	[33]	ISDI	[TNI]	[TV]	נוודו	(VT)	[V/A]	[137.4.3	[07/7]	rwn	ואייי	LDI	

[SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEE	DS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	none	none
	Equity	none	none
	-1····		
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	none	none
	Partnership Interests	none	none
	Other (Specify Membership Interests in LLC)	\$1,000,000	\$1,000,000
	Total	\$1,000,000	\$1,000,000
	Answer only in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "1" if answer is "none" or "zero."		
	,	Number	Aggregate Dollar Amount
		Investors of	Purchases
	Accredited Investors	0	0
	Non-accredited Investors	0	0
	Total (for filings under Rule 504 only)	0	0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Type of Officing	Type of Security	5010
	Rule 505	\$	\$
	Regulation A	\$	\$
	Rule 504	\$	\$
	Total	•	•

4.	a. Furnish a statement of all expenses in connection with the issuance and
	distribution of the securities in this offering. Exclude amounts relating solely to
	organization expenses of the issuer. The information may be given as subject to future
	contingencies. If the amount of an expenditure is not known, furnish an estimate and
	check the box to the left of the estimate.

\$500.00*	lacksquare	Transfer Agent's Fees
\$		Printing and Engraving Costs
\$10,000.00*	\square	Legal Fees
\$. 🗆	Accounting Fees
\$		Engineering Fees
\$15,000.00*	Ø	Sales Commissions (specify finders' fees separately)
\$		Other Expenses (identify)
\$25,500.00*	Ø	Total

^{*} Approximate.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b.	Enter the difference between the aggregate offering and total expenses furnished in response to Part C - gross proceeds to the issuer."	Question 4.a. This difference is the "adjusted	\$974	1,500
che	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any p is the box to the left of the estimate. The total of the eeds to the issuer set forth in response to Part C - Qu	purpose is not known, furnish an estimate and payments listed must equal the adjusted gross	_	
	Salaries and fees		_ \$	
	Purchase of real estate		_ \$	\$550,000 (1)
	Purchase, rental or leasing and installations of	f machinery and equipment	_ s	s
	Construction or leasing of plant buildings and	facilities	_ \$	\$
	Acquisition of other businesses (including the offering that may be used in exchange for the	assets or securities of another issuer	•	•
			_	
	Repayment of indebtedness		_ \$	s
	Working capital		_ \$	\$
	Other (Specify			
	Lease Up Costs		_ \$	<u>\$91,000</u>
	Formation Costs		_ \$	\$ <u>30,000</u>
	Capital Reserves		_ \$	\$303,500
	Column Totals		_ \$	\$
	Total Payments Listed (column totals added)			\$974,500
(1)	ncludes closing costs associated with real estate closi	ing.		
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furrimation furnished by the issuer to any non-accredited	hish to the U.S. Securities and Exchange Commis	ssion, upon writte	
Issu	er (Print or Type)	Signature	Date	
AL	SPACE SELF STORAGE, LLC	Maria	7.	15-08
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
AB	RAHAM TIEH	MANAGER		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

Yes No

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

v

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to
 offerees.
- 3. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

Signature

Date

ALLSPACE SELF STORAGE, LLC Name (Print or Type)

Title (Print or Type)

ABRAHAM TIEH

MANAGER

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3			4		5 Disqualit	<i>د.</i>
	to non- investo	Type of security and aggregate o non-accredited offering price Type of investor and amount purchased in State Part B-Item 1) (Part C-Item 1) (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X 1	Membership Intere \$50,000	st 1	\$50,000	0	0		X
со									
CT									
DE									
DC									
FL									
GA									
HI ID									
ΙL								•	
IN									
IA									
KS									
KY									

APPENDIX

1	2		3			4		5	
	investo	to sell accredited ors in State 3-Item 1)	offering in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualifi under State (if yes, a explanati waiver gra (Part E-Ite	e ULOE ttach on of anted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-accredited Investors	Amount	Yes	No
LA									
ME									
MD									
MA		X 1	Membership Interes \$50,000	t I	\$50,000	0	0		x
MI									
MN									
MS									
МО									
MT									
NE									
NV									
NH									
NJ		X 1	l Membership Interes \$50,000	t 1	\$50,000	0	0		x
NM									
NY									
NC									
ND									
ОН									

APPENDIX

1	2 3			5	5				
	Intend to sell and aggreg to non-accredited investors in State (Part B-Item 1) Type of sec and aggreg offering proffering proffering in a content of the co			Number of	Type of amount (Part C		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Accredited Investors	Amount	Number of Non-accredited Investors	Amount	Yes	No
ok						••••			2.0
OR									
PA									
RI									
SC								٠	
SD									
TN									
TX		X t	7 Membership Intere \$850,000	ests 12	\$850,000	0	0		x
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR									

